State of California Department of Pesticide Regulation Pesticide Registration Branch		Pesticide Research Authorization				DPR Use Only				
Researcher							Talan	hone No		
Firm Name						Telephone No.				
Address										
City, State, Zip						Type or print this information for use as a mailing label.				
Pesticide					Maximum Rate of A.I. (per acre or other units)			U.S. EPA Registration No. (if any)		
1.										
2.										
3.										
4.										
Type of Pesticide	3	☐ Insecticide/Acaricide		☐ Herbicide		☐ Desiccant/Defoliant		☐ Nematicide	☐ Rodenticide	
Type of Testicide		☐ Spray Adjuvant		☐ Fungicide		Plant Growth Regulator		☐ Other:		
Commodity or Site to be Treated						Size of each Trial	Number of Trials		Total Area	
1.										
2.						Method of Aerial Application ☐ Aerial ☐ Handheld Applications? ☐ Wultiple ☐ Yes Applications? ☐ No				
3.						Type of Data Sought: Disposition of Treated Commodity: (See instructions if not crop destruct)				
4.										
5.										
Stage of Growth:	ng Season (All Stages)			Starting Date (first application)	Last Application Date		Trial Completion (crop harvest/destruct)			
☐ Post Harvest ☐ Dormant ☐ Other						(mst application)			(crop naivest/destruct)	
Signature of T Responsible Researcher						Title			Date	
			D:	PR Use	Only -	- Below This Line				
Conditions: This	s autho	orization is approved f	or use state	wide and	expires	on the completion dat	e show	n above unless other	wise specified.	
A Treated	comm	odity may be harveste	ed.							
B □ Non-Cro	op - No	o harvestable food/fee	ed crop is in	volved.						
		odity must be destroy	ed or							
used for D Other:	resear	ch purposes only.								
Approval								Date		